

EMPLOYEE RECOGNITION/AWARD NOMINATION AND APPROVAL FORM

Note: For group awards, attach list of group members, showing name, pay plan, series and grade, SSN, TKN and award amount for each employee.

1. Employee's Name: Last, First, Middle		2. Organization									
3. Social Security Number (SSN)		4. Position Title, Series, Grade, Salary									
5. Period Covered in Nomination (mo., day, yr.) From: To:		6. Common Accounting Number (CAN)									
<p>7. Type of Recognition (check one) :</p> <p> <input type="checkbox"/> On-the-Spot <input type="checkbox"/> Special Act or Service <input type="checkbox"/> Quality Step Increase (QSI) <input type="checkbox"/> Staff Recognition Award <input type="checkbox"/> Suggestion* <input type="checkbox"/> Invention* <input type="checkbox"/> Time-Off </p> <p>*Attach a description of the idea or patent notification being recognized and the resulting benefit to the Government.</p>											
<p>8. Justification: Summarize employee(s) contribution (Attach additional sheets) if necessary .</p>											
<p>9. (a) Benefit Amount (tangible savings) \$ _____</p> <p>(b) Intangible Savings (Check appropriate box in 1 and 2 below):</p> <table border="0"> <tr> <td>(1) Value of Contribution:</td> <td>(2) Extent of Application:</td> </tr> <tr> <td><input type="checkbox"/> Small/Moderate</td> <td><input type="checkbox"/> Limited</td> </tr> <tr> <td><input type="checkbox"/> Moderate/Substantial</td> <td><input type="checkbox"/> Broad</td> </tr> <tr> <td><input type="checkbox"/> Substantial/High</td> <td><input type="checkbox"/> General</td> </tr> </table>				(1) Value of Contribution:	(2) Extent of Application:	<input type="checkbox"/> Small/Moderate	<input type="checkbox"/> Limited	<input type="checkbox"/> Moderate/Substantial	<input type="checkbox"/> Broad	<input type="checkbox"/> Substantial/High	<input type="checkbox"/> General
(1) Value of Contribution:	(2) Extent of Application:										
<input type="checkbox"/> Small/Moderate	<input type="checkbox"/> Limited										
<input type="checkbox"/> Moderate/Substantial	<input type="checkbox"/> Broad										
<input type="checkbox"/> Substantial/High	<input type="checkbox"/> General										
10. Number of Employees :	11. Total Award Amount or Hours :	12. Date of Last Within Grade Increase or QSI :									
<p>13. Certification for QSI: I certify by my signature below that the employee's performance elements and standards for the current position were thoroughly reviewed prior to submission of this nomination, that the employee's performance is characteristic at least Fully Satisfactory and that this level of performance is expected to continue in the future.</p>											
Signature of Approving Authority _____		Date _____									
14. Initiating Official Name/Title/Signature/Date :											
15. Human Resources Reviewer Name/Title/Signature/Date :											
16. Approving Official Name/Title/Signature/Date (Funds Available) :											
17. Nature of Action Code (NOAC) for processing personnel action:	18. Effective Date :	19. Legal Authority Code :									

